MEHRMAN LAW OFFICE No.0893 P. 2/3 Mar.28. 2006 3:03PM PART B - FEE(S) TRANSMITTAL Complete and end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 MAR 2 8 2006 (571)-273-2885 STRUCTIONS his form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicating a corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 03/09/2006 7590 35725 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. MEHRMAN LAW OFFICE, P.C. ONE PREMIER PLAZA 5605 GLENRIDGE DRIVE, STE. 795 ATLANTA, GA 30342 (Depositor's name 03/29/2006 TBESHAH2 00000059 10736402 (Signature) 01 FC:2501 02 FC:1504 700.00 OP (Date) 300.00 OP CONFIRMATION NO. ATTORNEY DOCKET NO. PILING DATE FIRST NAMED INVENTOR APPLICATION NO. 6199 4501.1-060 Joseph R. Rostron 12/15/2003 10/736,402 TITLE OF INVENTION: CAPACITOR SWITCH WITH INTERNAL RETRACTING IMPEDANCE CONTACTOR DATE DUE TOTAL FEE(S) DUE **ISSUE FEE** PUBLICATION FEE APPLN TYPE SMALL ENTITY \$1000 06/09/2006 \$300 \$700 nonprovisional YES CLASS-SUBCLASS EXAMINER ART UNIT 218-144000 2836 BAUER, SCOTT ALLEN Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Michael J. Mehrman (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent antomeys or agents. If no name is listed, no name will be printed. 2Mehrman Law Office I ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/5B/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🔲 Corporation or other private group entity 🔲 Government 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Issue Fee A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 5.0. -2.5.9.1 (enclose an extra copy of this form). Advance Order - # of Copies Deposit Account Number 50 2591 5. Change in Entity Status (from status indicated above) b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Date

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Authorized Signature

L J. MEHRMAN

## MEHRMAN LAW OFFICE, P.C.

PATENT, COPYRIGHT, TRADEMARK, TRADE SECRET AND RELATED LITIGATION

DIRECT: 404.497.7401 MOBILE: 678.637.6080

## **FAX**

To: Mail Stop Issue Fee

From: Zilla Higgs for

United States Patent and Trademark Office

Michael J. Mehrman, Esq.

Fax: (571) 273-2885

Pages: 3 including cover

Phone:

Date: March 28, 2006

Re:

Non-Provisional Patent Application for the invention

**Capacitor Switch with Internal Retracting Impedance Contactor** 

Serial No.: 10/736,402

Our Ref. No.:4S01.1-060

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle PLEASE CALL 404.497.7402 IMMEDIATELY IF NOT RECEIVED PROPERLY

**COMMENTS:** 

Issue Fee Transmittal
Credit Card Payment Form

NOTICE
THE INFORMATION TRANSMITTED HEREWITH MAY CONTAIN PRIVILEGED, TRADE SECRET AND/OR CONFIDENTIAL INFORMATION, AND IS INTENDED SOLELY FOR THE VIEWING AND USE OF THE PERSON OR ENTITY NAMED ABOVE. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY REVIEW, USE, COMMUNICATION, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY THE SENDER IMMEDIATELY BY TELEPHONE, AND RETURN OR DESTROY ALL COPIES.